

Southern California Association of Governments
Supplemental Questionnaire for
BUSINESS SUPPORT SUPERVISOR #241

INSTRUCTIONS TO APPLICANTS: This questionnaire is a part of the selection procedure that will help us in evaluating your experience as it relates to the job. Only those applicants who have the most appropriate qualifications will be invited to participate further in the selection process. The following questions must be addressed and submitted with your application and resume to be considered for the position. You may attach up to three additional sheets if necessary. Submitted materials will not be returned.

Please describe your experience in any or all of the following areas. Include your job title, your specific role, the length of time you performed the work and the name of your employer.

1. Supervision – Specify number and title of positions supervised and indicate the level of your supervisory authority (i.e., review and assign work, train, complete performance evaluations)

2. Coaching, training and disciplining employees (Give specific examples)

3. Assessing, developing and modifying work procedures and methods

4. Supporting executive management

5. Determining and implementing work unit objectives and priorities

6. Facilities management

CERTIFICATION

I certify that the information presented in my application materials is true to the best of my knowledge. I understand that any false information may affect my getting or keeping this position.

Applicant's Signature

Date